PTO/SB/21 (02-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/629,338 TRANSMITTAL Filing Date 07-29-2003 **FORM** First Named Inventor Gauthier et al Art Unit 2172 (to be used for all correspondence after initial filing) **Examiner Name** Kindred, Alford R. **Attorney Docket Number** TES05-GN010C3 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance communication ~ Drawing(s) to Technology Center (TC) Fee Transmittal Form Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a **Proprietary Information** After Final **Provisional Application** Power of Attorney, Revocation **Status Letter** Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please / Terminal Disclaimer Identify below): **Extension of Time Request** RETURN POST CARD Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Remarks Certified Copy of Priority Document(s) RESPONSE TO OFFICE ACTION (3 PGS) AND TERMINAL DISCLAIMER Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm David-A. Mancino, Reg. No. 39,289 Individual name Signature Date 08-20-2004 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Sharon A Shelton, Paralegal Date 08-20-2004 Signature This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)

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## FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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Complete if Known		
Application Number	10/629,338	
Filing Date	07-29-2003	
First Named Inventor	Gauthier et al	
Examiner Name	Kindred, Alford R.	
Art Unit	2172	
Attorney Docket No.	TES05-GN010-C3	

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	TIONAL FEES					
Deposit Account:		Large Entity   Small Entity				
Deposit 50,0070	Fee Fee Code (\$)	Fee Fee Fee Description Code (\$) Fee Paid				
Account Number 50-3072	1051 130					
Deposit Account	1052 50	2052 25 Surcharge - late provisional filing fee or cover sheet				
Name	1053 130					
The Director is authorized to: (check all that apply)  Charge fee(s) indicated below  Credit any overpayments	1812 2,520	1812 2,520 For filing a request for ex parte reexamination				
Charge any additional fee(s) or any underpayment of fee(s)	1804 920					
Charge fee(s) indicated below, except for the filing fee	1805 1,840	Examiner action  1805 1,840* Requesting publication of SIR after				
to the above-identified deposit account.	1000 1,040	Examiner action ————				
FEE CALCULATION	1251 110					
1. BASIC FILING FEE	1252 420					
Large Entity Small Entity  Fee Fee Fee Fee Description Fee Paid	1253 950					
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254 1,480					
1001 770 2001 385 Utility filing fee	1255 2,010					
1002 340 2002 170 Design filing fee	1401 330					
1003 530 2003 265 Plant filing fee	1402 330					
1004 770   2004 385   Reissue filing fee	1403 290					
1005 160 2005 80 Provisional filing fee	1451 1,510 1452 110					
SUBTOTAL (1) (\$)	1453 1,330					
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501 1,330					
Fee from Ext <u>ra Claims below Fee Paid</u>	•					
Total Claims -20** = X =	1503 640	2503 320 Plant issue fee				
Independent Claims X = X	1460 130	1460 130 Petitions to the Commissioner				
Multiple Dependent	1807 50	1807 50 Processing fee under 37 CFR 1.17(q)				
Large Entity   Small Entity Fee Fee   Fee Fee   Fee Description	1806 180					
Code (\$) Code (\$)	8021 40	8021 40 Recording each patent assignment per property (times number of properties)				
1202 18 2202 9 Claims in excess of 20	1809 770	2809 385 Filing a submission after final rejection				
1201 86 2201 43 Independent claims in excess of 3		(37 CFR 1.129(a))				
1203 290 2203 145 Multiple dependent claim, if not paid	1810 770	2810 385 For each additional invention to be examined (37 CFR 1.129(b))				
1204 86 2204 43 ** Reissue independent claims over original patent	1801 770	·				
1205 18 2205 9 ** Reissue claims in excess of 20	1802 90					
and over original patent	Other fee (s	of a design application specify) TERMINAL DISCLAIMER 55.00				
SUBTOTAL (2) (\$)		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 55.00				
"or number previously paid, if greater; For Reissues, see above " " " " " " " " " " " " " " " " " " "						
SUBMITTED BY		(Complete (if applicable))				

SUBMITTED BY			(Complete (if applicable))			
Name (Print/Type) David A. Mancino		Registration No. (Attorney/Agent) 39,289	Telephone 513-357-9331			
Signature		D	Date	8/20/04		

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